## PART B - FEE(S) TRANSMITTAL

Complete and send this form, together with applicable fee(s), to: Mail Mail Stop ISSUE FEE

Commissioner for Patents P.O. Box 1450 Alexandria, Virginia 22313-1450

or Fax (571)-273-2885

INSTRUCTIONS: This form should be used for transmitting the ISSUE FEE and PUBLICATION FEE (if required). Blocks 1 through 5 should be completed where

appropriate. All further indicated unless correcte maintenance fee notifical	ed below or directed oth	ng the Patent, advance of serwise in Block 1, by (a		pondence address; and	vos (o) muicating a sepa	dar int appress to	
CURRENT CORRESPONDENCE ADDRESS (Note: Use Block 3 for any change of address)				Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.			
Nixon Peabody LLP 401 9th Street N.W. Suite 900 Washington, DC 20004				Certificate of Mailing or Transmission  I hereby certify that this Fee(s) Transmittal is being deposited with the United States Postal Service with sufficient postage for first class mail in an envelope addressed to the Mail Stop ISSUE FEE address above, or being facsimile transmitted to the USPTO (571) 273-2885, on the date indicated below.  (Depositor's name)			
			<u> </u>			(Date)	
APPLICATION NO.	FILING DATE		FIRST NAMED INVENTOR	AT	TORNEY DOCKET NO.	CONFIRMATION NO.	
10/560,336	04/26/2007		Claudia Woppmann		051058-1000	2542	
TITLE OF INVENTION	: DOUBLE-STRANDEI	) RIBONUCLESC ACIL	) WITH INCREASED EFF			······································	
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FE			
nonprovisional	NO	\$1510	\$300	\$0	\$1810	06/15/2010	
EXAM	INER	ART UNIT	CLASS-SUBCLASS				
ZARA, JANE J		1635	536-024500  2. For printing on the p				
Address form PTO/SE  "Fee Address" indi PTO/SB/47; Rev 03-0 Number is required.	ondence address (or Cha 3/122) attached. ication (or "Fee Address' 2 or more recent) attach	nge of Correspondence  Indication form ed. Use of a Customer	(1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.  1 Nixon Peabody LLP  2 Jeffrey N. Townes  3				
PLEASE NOTE: Uni- recordation as set forth (A) NAME OF ASSIG	ess an assignee is identi h in 37 CFR 3.11. Comp 3NEE	ified below, no assignee eletion of this form is NO	THE PATENT (print or type data will appear on the p T a substitute for filing an (B) RESIDENCE: (CITY Cambridge,	atent. If an assignee i assignment. and STATE OR COU		locument has been filed for	
Alnylam Pharmaceuticals, Inc. Cambridge, MA  Please check the appropriate assignee category or categories (will not be printed on the patent): Individual Corporation or other private group entity Government							
4a. The following fee(s) a  Issue Fee  Publication Fee (N		4l ermitted)	b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above)  A check is enclosed.  Payment by credit card. Form PTO-2038 is attached.  The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 19-2380 (enclose an extra copy of this form).				
5. Change in Entity Stat	SMALL ENTITY statu	s. See 37 CFR 1.27.	b. Applicant is no lon			FR 1.27(g)(2). he assignee or other party in	
interest as shown by the n	ecords of the United Sta	tes Patent and Trademark	Office.				
Authorized Signature	/Jeffrey N.	Townes, Reg. 1	No. 47,142/		15, 2010		
		Townes			47,142		
			on is required to obtain or to 1.14. This collection is est depending upon the indive Chief Information Office COMPLETED FORMS TO spond to a collection of inf			d by the USPTO to process) ng gathering, preparing, and ime you require to complete partment of Commerce, P.O. for Patents, P.O. Box 1450, I number.	